

Campaign Finance Report Short Form EB-2a State Elections Board	
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<input type="checkbox"/> Spring <input type="checkbox"/> Fall <input type="checkbox"/> Special Pre-Primary _____	<input type="checkbox"/> Continuing Report due Jan. 31, _____
<input type="checkbox"/> Spring <input type="checkbox"/> Fall <input type="checkbox"/> Special Pre-Election _____	<input checked="" type="checkbox"/> Continuing Report due July 20, <u>2014</u>

Buckley for County Board

Name of Candidate or Committee (in full)


3066 West Port Rd

Address (number and street)

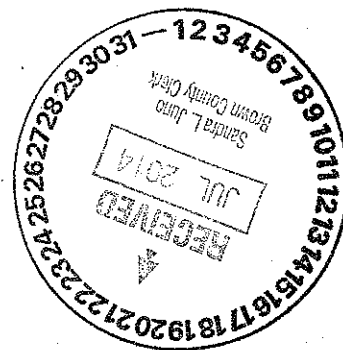
Green Bay WI 54313

City, State, Zip

I certify that the above named committee or candidate did not receive contributions or other income, make disbursements, or incur obligations during the period covered by this report and that the cash balance remains the same as previously reported. This report fulfills filing requirements under Sec. 11.06(9), Stats.

Signature of Committee Treasurer or Candidate 	Date <u>7-21-14</u>	Daytime Phone <u>920 497-3052</u>
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EB-2a (Rev. 9/95) (Reformatted 3/98) (XK-9/99)



**SHORT FORM – Use For “No
Activity” Reporting Period**

*****End of Report*****

**CAMPAIGN FINANCE REPORT
STATE OF WISCONSIN
GAB-2**



COMMITTEE IDENTIFICATION

Filing Period Name:	July Continuing 2014 Covers all activity from 01/01/2014 through 06/30/2014	OFFICE USE ONLY GAB ID: 0105552
Name of Committee/Corporation:	Friends of Corrie Campbell	
Street Address:	931 Watermolen Ave	
City, State and Zip:	Green Bay, WI 54304	

SUMMARY OF RECEIPTS AND DISBURSEMENTS	Column A This Period	Column B Calendar Year-To-Date
1. RECEIPTS		
1A. Contributions (Including Loans) from Individuals	\$1,225.00	\$1,225.00
1B. Contributions from Committees (Transfers-In)	\$500.00	\$500.00
1C. Other Income and Commercial Loans	\$0.00	\$0.00
TOTAL RECEIPTS (Add totals from 1A, 1B and 1C)	\$1,725.00	\$1,725.00
2. DISBURSEMENTS		
2A. Gross Expenditures	\$1,629.36	\$1,629.36
2B. Contributions to Committees (Transfers-Out)	\$0.00	\$0.00
TOTAL DISBURSEMENTS (Add totals from 2A and 2B)	\$1,629.36	\$1,629.36

CASH SUMMARY

Cash Balance Beginning of Report *	\$0.00	
Total Receipts	\$1,725.00	
Subtotal	\$1,725.00	
Total Disbursements	\$1,629.36	
CASH BALANCE END OF REPORT *	\$95.64	
INCURRED OBLIGATIONS		
(Balance at the Close of This Period-3A)	\$0.00	
LOANS (Balance at the Close of This Period-3B)	\$0.00	

*Cash Balance as reported by committee

I certify that I have examined this report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Candidate or Treasurer: Anderson, Jon D	Signature of Candidate or Treasurer: Corrie Campbell/ca Date: _____ Daytime Phone: _____ Email: jon@gblawyer.com
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NOTE: The information on this form is required by ss.11.06, 11.20, Wis. Stats. Failure to provide the information may subject you to the penalties of ss.11.60, 11.61, Wis. Stats.

GAB-2 (Rev. 12/03) This form is prescribed by the Government Accountability Board, P.O. Box 7984, Madison, WI 53707-7984, 608-266-8005.

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SCHEDULE 1-A**RECEIPTS
Contributions From Individuals**

Complete Committee Name: Friends of Corrie Campbell

Date	Full Name	Address	Occupation	Employer Name	Employer Address	Amount	YTD
Monetary							
04/16/2014	Anderson, Jon D	3580 Glen Oaks Pass, Green Bay, WI 54311	Attorney			\$50.00	\$50.00
04/16/2014	Garner, Wesley	3480 Counrty Winds Ct, Green Bay, WI 54311	Owner	Great Lakes Calcium Chemical	1450 Byslby Ave, Green Bay, WI 54303	\$500.00	\$500.00
04/28/2014	Ancous, Janet	1403 Shirley St, Green Bay, WI 54303	Attorney			\$100.00	\$100.00
05/12/2014	Garner, Fred	N Shore Acres Dr, New Franklin, WI 54229	Retired			\$100.00	\$100.00
06/27/2014	Tochterman, Robert	950 Watermelon Ave, Green Bay, WI 54304	Retired			\$100.00	\$100.00
Sub Total						\$850.00	
In-Kind							
06/30/2014	Jahnke, Robert	239 Libal St, De Pere, WI 54115	Owner	TopHat Marketing	239 Libal St, DePere, WI 54115	\$375.00	\$375.00
	Comment(s): Fliers						
Sub Total						\$375.00	
Total Unitemized Contributions						\$0.00	
Total Anonymous Contributions						\$0.00	
Grand Total						\$1,225.00	
Non-Monetary (-)						\$0.00	
Loan Forgiven (-)						\$0.00	
Total						\$1,225.00	

SCHEDULE 1-B**RECEIPTS
Contributions from Committees
(Transfers-In)**

Complete Committee Name: Friends of Corrie Campbell

Date	Full Name	Address	Amount	YTD
In-Kind				
06/27/2014	Republican Party of Wisconsin	148 East Johnson Street, Madison, WI 53703	\$500.00	\$500.00
	Comment(s): Voter List			
Sub Total			\$500.00	
Grand Total			\$500.00	
Non-Monetary (-)			\$0.00	
Total			\$500.00	

SCHEDULE 1-C**RECEIPTS****Other Income and Commercial Loans**

Complete Committee Name: Friends of Corrie Campbell

Date	Full Name	Address	Amount	YTD
Total			\$0.00	

SCHEDULE 2-A**DISBURSEMENTS
Gross Expenditures**

Complete Committee Name: Friends of Corrie Campbell

Date	Full Name	Address	Vendor Name	Vendor Address	Expense Purpose	Amount
In-Kind						
06/27/2014	Republican Party of Wisconsin	148 East Johnson Street, Madison, WI 53703			Mailing List	\$500.00
	Comment(s): Voter List					
06/30/2014	Jahnke, Robert	239 Libal St, De Pere, WI 54115			Printing - Brochures	\$375.00
	Comment(s): Flier Distributed Campaign					
Sub-Total						\$875.00
Monetary						
05/01/2014	Heyerman Printing	2083 Holmgren Ave, Green Bay, WI 54304			Printing - Brochures	\$110.78
	Comment(s): Posters/Fliers Campaign					
05/05/2014	Fast Signs	2815 S Oneida St, Green Bay, WI 54304			Printing Misc. (buttons, bumper stickers, t-shirts)	\$78.15
	Comment(s): Car Magnets Campaign					
05/07/2014	Fed Ex Office	2279 S Oneida St, Green Bay, WI 54304			Printing - Brochures	\$105.50
	Comment(s): Fliers for campaign					
05/13/2014	Government Accountability Board	212 East Washington Avenue, 3rd Floor, P.O. Box 7984, Madison, WI 53707-7984			Mailing List	\$70.00
	Comment(s): Voter Data List					
06/24/2014	Office Depot	1535 W Mason St, Green Bay, WI 54303			Office Supplies	\$90.68
	Comment(s): Envelopes, ink for campaign fliers and donor letters					

Monetary						
06/24/2014	New Documents and Labels Inc	2688 Hillside Heights Dr, Green Bay, WI 54311			Printing Misc. (buttons, bumper stickers, t-shirts)	\$231.05
	Comment(s): Postcards-campaign					
06/27/2014	US Postal Service	300 Packerland Dr, Green Bay, WI 54303			Postage	\$49.00
	Comment(s): Postage stamps for postcard mailings					
Sub Total						\$735.16
Unitemized						
06/30/2014	Unitemized	WI			Unitemized	\$19.20
	Comment(s): Unitemized expenditure					
Sub Total						\$19.20
Grand Total						\$1,629.36
Non-Monetary (+/-)						\$0.00
Total						\$1,629.36

SCHEDULE 2-B**DISBURSEMENTS**
Contributions To Committees
(Transfers-Out)**Complete Committee Name:** Friends of Corrie Campbell

Date	Full Name	Address	Vendor Name	Vendor Address	Amount
Grand Total					\$0.00
Non-Monetary (-)					\$0.00
Registrant In-Kind Sub Total (-)					\$0.00
Total					\$0.00

SCHEDULE 3-A**ADDITIONAL DISCLOSURE**
Incurred Obligations Excluding Loans

Complete Committee Name: Friends of Corrie Campbell

Beginning Incurred Obligation Amount: \$0.00

Date	Full Name	Address	Amount
Grand Total			\$0.00

Date	Full Name	Amount Paid
Grand Total		\$0.00
Outstanding Incurred Obligations End of Report		\$0.00

SCHEDULE 3-B**ADDITIONAL DISCLOSURE**
Loans
Individual, Committee or Commercial

Complete Committee Name: Friends of Corrie Campbell

Beginning Loan Balance: \$0.00

Date	Full Name	Address	Amount
Grand Total			\$0.00

Date	Full Name	Amount Paid
Grand Total		\$0.00
Outstanding Loans End of Report		\$0.00

*****End of Report*****

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Campaign Finance ReportShort Form EB-2a
State Elections Board

☐ Spring ☐ Fall ☐ Special Pre-Primary ☐ Continuing Report due Jan. 31, _____
☒ Spring ☐ Fall ☐ Special Pre-Election ☒ Continuing Report due July 20, 14

Name of Candidate or Committee (in full)

Sandy Duckett

Address (number and street)

2552 Wilder Ct.

City, State, Zip

Green Bay, WI 54311

I certify that the above named committee or candidate did not receive contributions or other income, make disbursements, or incur obligations during the period covered by this report and that the cash balance remains the same as previously reported. This report fulfills filing requirements under Sec. 11.06(9), Stats.

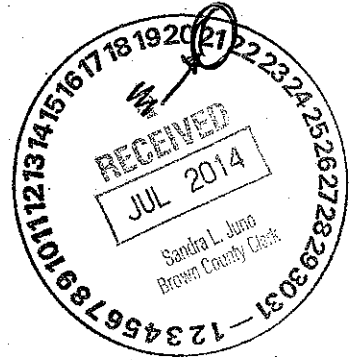
Signature of Committee Treasurer or Candidate

Date

Daytime Phone

Andrew M. Duckett7/10/14920-619-4093

EB-2a (Rev. 9/95) (Reformatted 3/98) (Y2K 9/99)

**SHORT FORM – Use For “No
Activity” Reporting Period*******End of Report*****

Campaign Finance Report
Short Form EB-2a
State Elections Board

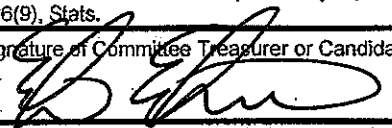
☐ Spring ☐ Fall ☐ Special Pre-Primary ☐ Continuing Report due Jan. 31, _____
☐ Spring ☐ Fall ☐ Special Pre-Election ☒ Continuing Report due July 20, 2014

Eisenheim for a Better Green Bay
Name of Candidate or Committee (in full)

843 Dousman St. / Green Bay, WI 54303
Address (number and street)

Green Bay, WI 54303
City, State, Zip

I certify that the above named committee or candidate did not receive contributions or other income, make disbursements, or incur obligations during the period covered by this report and that the cash balance remains the same as previously reported. This report fulfills filing requirements under Sec. 11.06(9), Stats.

Signature of Committee Treasurer or Candidate	Date	Daytime Phone
	7/21/14	(920) 430-8338

EB-2a (Rev. 9/95) (Reformatted 3/98) (Y2K 9/99)



**SHORT FORM – Use For “No
Activity” Reporting Period**

*****End of Report*****

Campaign Finance Report Short Form EB-2a State Elections Board		
<input type="checkbox"/> Spring <input type="checkbox"/> Fall <input type="checkbox"/> Special Pre-Primary _____		<input type="checkbox"/> Continuing Report due Jan. 31, _____
<input type="checkbox"/> Spring <input type="checkbox"/> Fall <input type="checkbox"/> Special Pre-Election _____		<input checked="" type="checkbox"/> Continuing Report due July 20, <u>2014</u>
<i>Patrick M. Evans - Supervisor District 9</i> Name of Candidate or Committee (in full) <i>Friends of Patrick Evans</i> <i>328 David Drive</i> Address (number and street) <i>Green Bay, WI 54303-3307</i> City, State, Zip		
I certify that the above named committee or candidate did not receive contributions or other income, make disbursements, or incur obligations during the period covered by this report and that the cash balance remains the same as previously reported. This report fulfills filing requirements under Sec. 11.06(9), Stats.		
Signature of Committee Treasurer or Candidate <i>Jim J. Riffle, MD Treasurer</i>	Date <i>7-16-14</i>	Daytime Phone <i>920 444 2265</i>
EB-2a (Rev. 9/95) (Reformatted 3/98) (Y2K 9/99)		



**SHORT FORM – Use For “No
Activity” Reporting Period**

*****End of Report*****

Campaign Finance ReportShort Form EB-2a
State Elections Board

<input type="checkbox"/> Spring	<input type="checkbox"/> Fall	<input type="checkbox"/> Special	Pre-Primary	<input type="checkbox"/> Continuing Report due Jan. 31,
<input type="checkbox"/> Spring	<input checked="" type="checkbox"/> Fall	<input type="checkbox"/> Special	Pre-Election	<input checked="" type="checkbox"/> Continuing Report due July 20, 2014

Name of Candidate or Committee (in full)

Friends of John Gossage

Address (number and street)

2430 E. Ridge Terrace

City, State, Zip

Green Bay, WI 54311

I certify that the above named committee or candidate did not receive contributions or other income, make disbursements, or incur obligations during the period covered by this report and that the cash balance remains the same as previously reported. This report fulfills filing requirements under Sec. 11.06(9), Stats.

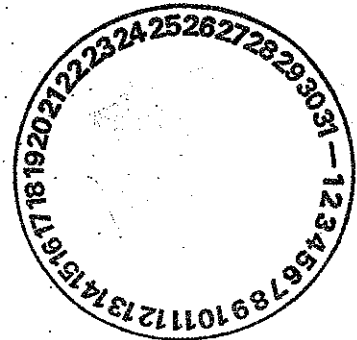
Signature of Committee Treasurer or Candidate

Date

Daytime Phone

EB-2a (Rev. 9/95) (Reformatted 3/98) (Y2K 9/99)

07/09/14 920-465-0359

**SHORT FORM – Use For “No
Activity” Reporting Period*******End of Report*****

CAMPAIGN FINANCE REPORT LOCAL COMMITTEES OF WISCONSIN

Is This Report an Amendment: ☐ Yes ☐ No

Instructions for completing schedules are on the back of each schedule.

COMMITTEE IDENTIFICATION

Name of Committee

Friends of Stausen Gruszynski

Street Address

2700 Humboldt Rd Apt 4

City, State and Zip Code

Green Bay WI 54301



Please check if address is different than previously reported, and complete the Campaign Registration Statement in the back of this form. ☐

NAME OF REPORT

☐ January Continuing ☐ Pre-Primary ☐ Spring ☐ Fall ☐ Special
☒ July Continuing 2014 ☐ Pre-Election ☐ Spring ☐ Fall ☐ Special

☐ Termination Report
also complete Schedule 4

SUMMARY OF RECEIPTS AND DISBURSEMENTS

1. RECEIPTS

	Column A This Period	Column B Calendar Year-To-Date
1A. Contributions (Including Loans) from Individuals	\$ 280.00	\$ 410.00
1B. Contributions from Committees (Transfers-In)	\$ —	\$ —
1C. Other Income and Commercial Loans	\$ —	\$ —
TOTAL RECEIPTS (Add totals from 1A, 1B and 1C)	\$ 280.00	\$ 410.00

2. DISBURSEMENTS

2A. Gross Expenditures	\$ 110.12	\$ 115.34
2B. Contributions to Committees (Transfers-Out)	\$ —	\$ —
TOTAL DISBURSEMENTS (Add totals from 2A and 2B)	\$ 110.12	\$ 115.34

CASH SUMMARY

Cash Balance Beginning of Report	\$ 634.33
Total Receipts	\$ 280.00
Subtotal	\$ 914.33
Total Disbursements	\$ 110.12
CASH BALANCE END OF REPORT	\$ 804.16
INCURRED OBLIGATIONS (Balance at the Close of This Period-3A)	\$
LOANS (Balance at the Close of This Period-3B)	\$

I certify that I have examined this report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Candidate or Treasurer	Signature of Candidate or Treasurer	Date:
<i>Stausen Gruszynski</i>	<i>[Signature]</i>	Daytime Phone: 920.216.3795

NOTE: The information on this form is required by ss.11.06, 11.20, Wis. Stats. Failure to provide the information may subject you to the penalties of ss.11.60, 11.61, Wis. Stats.

GAB-2L (Rev. 12/09) This form is prescribed by the Government Accountability Board. Completed forms must be filed with your local clerk.

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SCHEDULE 1-A
RECEIPTS
Contributions (Including Loans) From Individuals

 Page 1 of 1

Complete Committee Name

Friends of Steven Grunzgers

Instructions for completing schedules are on the back of each schedule.

Date	Full Name, Mailing Address and Zip Code	Occupation, Name and Address of Principal Place Of Employment (if year-to-date total exceeds \$100)	Amount	Calendar Year-to-Date Total
03/31/14	Tony Ocuz 2595 University Ave #12 Green Bay, WI 54311	Owner/Manager Bartender, Every Time I Dine LLC, 209 N. Washington St, Green Bay, WI 54301	\$150.00	150.00
04/02/14	Kathy Rohde 2130 East Dauphin Road, De Pere, WI 54115	Executive Director, BLUE, 1136 N. Military Ave, Green Bay, WI 54303	\$100.00	100.00
04/10/14	Dennis Hughes 1652 W. Humboldt Ave #4, Milwaukee, WI 53202		\$10.00	40.00
05/10/14	Dennis Hughes 1652 W. Humboldt Ave #4, Milwaukee, WI 53202		\$10.00	50.00
06/10/14	Dennis Hughes 1652 W. Humboldt Ave #4, Milwaukee, WI 53202		\$10.00	60.00
1 / 1				
1 / 1				
1 / 1				

SUBTOTAL ITEMIZED CONTRIBUTIONS THIS PAGE

\$ 280.00

TOTAL ITEMIZED CONTRIBUTIONS

\$ 280.00

TOTAL UNITEMIZED CONTRIBUTIONS \$20 OR LESS

\$ —

TOTAL CONTRIBUTIONS RECEIVED FROM INDIVIDUALS

\$ 280.00

Pg. 2 of 4

SCHEDULE 2-A
DISBURSEMENTS
Gross Expenditures

 Page 1 of 1

Complete Committee Name

Friends of Stash Gruszynski

Instructions for completing schedules are on the back of each schedule.

Date	Full Name, Mailing Address and Zip Code Of Person or Business to Whom Payment is Made	Specific Purpose of Expenditure	Amount
04/01/14	Democratic Party of Brown County 118 S. Chestnut St. Green Bay WI 54303 Check if: <input type="checkbox"/> In-Kind Offset	Member Printing -	\$33.25
04/04/14	Pay Pal 221 N. First St. San Jose, CA 95131 Check if: <input type="checkbox"/> In-Kind Offset	Fee For Service	\$4.65
04/23/14	San CD Democratic Party 15 N. Pickney St. Suite 200 Madison WI 53703 Check if: <input type="checkbox"/> In-Kind Offset	Event Tickets - Convention	\$37.50
04/23/14	Democratic Party of Brown County 118 S. Chestnut St. Green Bay WI 54303 Check if: <input type="checkbox"/> In-Kind Offset	Event Tickets - Spring Fling	\$33.00
06/06/14	Pay Pal 221 N. First St. San Jose, CA 95131 Check if: <input type="checkbox"/> In-Kind Offset	Fee for Service	\$1.18
06/30/14	Pay Pal 221 N. First St. San Jose, CA 95131 Check if: <input type="checkbox"/> In-Kind Offset	Fee for Service	\$0.59
/ /	Full Name, Mailing Address and Zip Code Of Person or Business to Whom Payment is Made Check if: <input type="checkbox"/> In-Kind Offset	Specific Purpose of Expenditure	Amount
/ /	Full Name, Mailing Address and Zip Code Of Person or Business to Whom Payment is Made Check if: <input type="checkbox"/> In-Kind Offset	Specific Purpose of Expenditure	Amount
/ /	Full Name, Mailing Address and Zip Code Of Person or Business to Whom Payment is Made Check if: <input type="checkbox"/> In-Kind Offset	Specific Purpose of Expenditure	Amount

SUBTOTAL ITEMIZED EXPENDITURES THIS PAGE

\$ 110.12

TOTAL ITEMIZED EXPENDITURES

\$

TOTAL UNITEMIZED EXPENDITURES \$20 OR LESS

\$

TOTAL EXPENDITURES

\$

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**TRANSMITTAL LETTER
STATE OF WISCONSIN**

WISCONSIN CAMPAIGN FINANCE INFORMATION SYSTEM

Transmittal Letter for Friends of Staush Gruszynski

Address Line1 2700 Humboldt

Address Line2 Apt #4

City, State and Zip Green Bay, WI 54311

Attached is a check for a total amount of \$100.00 for all the contributions listed below.

Transmittal letter Generated: 04/02/2014

S.NO	DATE	CONTRIBUTOR NAME	ADDRESS	AMOUNT
1	03/28/2014	Rohde, Kathy	2130 Lost Dauphin Rd. 5N, De Pere, WI 54115	\$100.00
	Occupation: Executive Director			
	Employer Details: BLUE, 1136 N. Military Ave., Green Bay, WI 54303			
TOTAL				\$100.00

Contact Address :

GAB ID:	0900059
Conduit Name:	United Staff Union (USUDGP)
Administrator Name:	Blank, James A
Contact No:	(262) 375-4475
Email Address:	blanjim@gmail.com

*****End of Report*****

**CAMPAIGN FINANCE REPORT
LOCAL COMMITTEES OF WISCONSIN**

Is This Report an Amendment: ☐ Yes ☒ No

Instructions for completing schedules are on the back of each schedule.

COMMITTEE IDENTIFICATION

Name of Committee

Friends of Julie Hornburg

Street Address

2879 Hillcrest Ct.

City, State and Zip Code

Green Bay WI 54313



Please check if address is different than previously reported, and complete the Campaign Registration Statement in the back of this form. ☐

NAME OF REPORT

☐ January Continuing ☐ Pre-Primary ☐ Spring ☐ Fall ☐ Special
☒ July Continuing ☐ Pre-Election ☐ Spring ☐ Fall ☐ Special

☐ Termination Report
also complete Schedule 4

SUMMARY OF RECEIPTS AND DISBURSEMENTS

Column A
This Period

Column B
Calendar
Year-To-Date

1. RECEIPTS

1A. Contributions (Including Loans) from Individuals

\$ 500⁰⁰

\$ 500⁰⁰

1B. Contributions from Committees (Transfers-In)

\$

\$

1C. Other Income and Commercial Loans

\$

\$

TOTAL RECEIPTS (Add totals from 1A, 1B and 1C)

\$ 500⁰⁰

\$ 500⁰⁰

2. DISBURSEMENTS

2A. Gross Expenditures

\$ 438⁶⁶

\$ 438⁶⁶

2B. Contributions to Committees (Transfers-Out)

\$

\$

TOTAL DISBURSEMENTS (Add totals from 2A and 2B)

\$ 438⁶⁶

\$ 438⁶⁶

CASH SUMMARY

Cash Balance Beginning of Report

\$ -0-

Total Receipts

\$ 500⁰⁰

Subtotal

\$ 500⁰⁰

Total Disbursements

\$ 438⁶⁶

CASH BALANCE END OF REPORT

\$ 61³⁴

INCURRED OBLIGATIONS

(Balance at the Close of This Period-3A)

\$ -0-

LOANS (Balance at the Close of This Period-3B)

\$ -0-

I certify that I have examined this report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Candidate or Treasurer

Julie Hornburg

Signature of Candidate or Treasurer

Julia M. Hornburg

Date:

7-20-14

Daytime Phone:

434-4737
448-4168

NOTE: The information on this form is required by ss.11.06, 11.20, Wis. Stats. Failure to provide the information may subject you to the penalties of ss.11.60, 11.61, Wis. Stats.

GAB-2L (Rev. 12/09) This form is prescribed by the Government Accountability Board. Completed forms must be filed with your local clerk.

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SCHEDULE 1-A
RECEIPTS
Contributions (Including Loans) From Individuals

Page ____ of ____

Complete Committee Name

Instructions for completing schedules are on the back of each schedule.

Date	Full Name, Mailing Address and Zip Code	Occupation, Name and Address of Principal Place Of Employment (if year-to-date total exceeds \$100)	Amount	Calendar Year-to-Date Total
3/8/14	Julie Hornburg 2879 Hillcrest Ct Green Bay WI 54313	Self	500 ⁰⁰	500 ⁰⁰
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit	Conduit Name:		
/ /	Full Name, Mailing Address and Zip Code	Occupation, Name and Address of Principal Place Of Employment (if year-to-date total exceeds \$100)		Calendar Year-to-Date Total
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit	Conduit Name:		
/ /	Full Name, Mailing Address and Zip Code	Occupation, Name and Address of Principal Place Of Employment (if year-to-date total exceeds \$100)	Amount	Calendar Year-to-Date Total
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit	Conduit Name:		
/ /	Full Name, Mailing Address and Zip Code	Occupation, Name and Address of Principal Place Of Employment (if year-to-date total exceeds \$100)	Amount	Calendar Year-to-Date Total
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit	Conduit Name:		
/ /	Full Name, Mailing Address and Zip Code	Occupation, Name and Address of Principal Place Of Employment (if year-to-date total exceeds \$100)	Amount	Calendar Year-to-Date Total
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit	Conduit Name:		
/ /	Full Name, Mailing Address and Zip Code	Occupation, Name and Address of Principal Place Of Employment (if year-to-date total exceeds \$100)	Amount	Calendar Year-to-Date Total
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit	Conduit Name:		
/ /	Full Name, Mailing Address and Zip Code	Occupation, Name and Address of Principal Place Of Employment (if year-to-date total exceeds \$100)	Amount	Calendar Year-to-Date Total
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit	Conduit Name:		
/ /	Full Name, Mailing Address and Zip Code	Occupation, Name and Address of Principal Place Of Employment (if year-to-date total exceeds \$100)	Amount	Calendar Year-to-Date Total
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit	Conduit Name:		

SUBTOTAL ITEMIZED CONTRIBUTIONS THIS PAGE

\$

TOTAL ITEMIZED CONTRIBUTIONS

 \$ 500⁰⁰

TOTAL UNITEMIZED CONTRIBUTIONS \$20 OR LESS

\$ - 0 -

TOTAL CONTRIBUTIONS RECEIVED FROM INDIVIDUALS

 \$ 500⁰⁰

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SCHEDULE 2-A
DISBURSEMENTS
Gross Expenditures

Page ____ of ____

Complete Committee Name

Instructions for completing schedules are on the back of each schedule.

Date	Full Name, Mailing Address and Zip Code Of Person or Business to Whom Payment is Made	Specific Purpose of Expenditure	Amount
4/10/14	Walmart 2440 W. Mason St Green Bay WI 54303 Check if: <input type="checkbox"/> In-Kind Offset	Paper/Envelopes	29.60
4/13/14	Shopko Express 2585 Lineville Rd Green Bay WI 54313 Check if: <input type="checkbox"/> In-Kind Offset	Postage Stamps	73.50
4/15/14	Perry Hornburg 2819 Hillcrest Ct Green Bay WI 54313 Check if: <input type="checkbox"/> In-Kind Offset	Reimbursement for printer ink	114.06
6/30/14	Brown Co. Clerk's Office 305 E. Walnut St Green Bay WI 54301 Check if: <input type="checkbox"/> In-Kind Offset	Election Report	205.00
4/3/14	Fox Comm. Credit Union Check if: <input type="checkbox"/> In-Kind Offset	Checks	16.50
/ /	Full Name, Mailing Address and Zip Code Of Person or Business to Whom Payment is Made Check if: <input type="checkbox"/> In-Kind Offset	Specific Purpose of Expenditure	Amount
/ /	Full Name, Mailing Address and Zip Code Of Person or Business to Whom Payment is Made Check if: <input type="checkbox"/> In-Kind Offset	Specific Purpose of Expenditure	Amount
/ /	Full Name, Mailing Address and Zip Code Of Person or Business to Whom Payment is Made Check if: <input type="checkbox"/> In-Kind Offset	Specific Purpose of Expenditure	Amount
/ /	Full Name, Mailing Address and Zip Code Of Person or Business to Whom Payment is Made Check if: <input type="checkbox"/> In-Kind Offset	Specific Purpose of Expenditure	Amount

SUBTOTAL ITEMIZED EXPENDITURES THIS PAGE

\$

TOTAL ITEMIZED EXPENDITURES

\$

TOTAL UNITEMIZED EXPENDITURES \$20 OR LESS

\$

TOTAL EXPENDITURES

\$

End of Report

Pg. 3 of 3

**CAMPAIGN FINANCE REPORT
LOCAL COMMITTEES OF WISCONSIN**

Is This Report an Amendment: ☐ Yes ☒ No

Instructions for completing schedules are on the back of each schedule.

COMMITTEE IDENTIFICATION

Name of Committee: **Friends of Julie Jansch**

Street Address: **2574 Oakwood Drive**

City, State and Zip Code: **Green Bay, WI 54304**



Please check if address is different than previously reported, and complete the Campaign Registration Statement in the back of this form. ☐

NAME OF REPORT

☐ January Continuing ☐ Pre-Primary ☐ Spring ☐ Fall ☐ Special
☒ July Continuing 2014 ☐ Pre-Election ☐ Spring ☐ Fall ☐ Special

☐ Termination Report
also complete Schedule 4

SUMMARY OF RECEIPTS AND DISBURSEMENTS

1. RECEIPTS

	Column A This Period	Column B Calendar Year-To-Date
1A. Contributions (Including Loans) from Individuals	\$ 100.00	\$ 2,485.00
1B. Contributions from Committees (Transfers-In)	\$ 300.00	\$ 850.00
1C. Other Income and Commercial Loans	\$	\$ 200.00
TOTAL RECEIPTS (Add totals from 1A, 1B and 1C)	\$ 400.00	\$ 3,535.00

2. DISBURSEMENTS

2A. Gross Expenditures	\$ 1,106.69	\$ 2,966.88
2B. Contributions to Committees (Transfers-Out)	\$ 50.00	\$ 50.00
TOTAL DISBURSEMENTS (Add totals from 2A and 2B)	\$ 1,156.69	\$ 3,016.88

CASH SUMMARY

Cash Balance Beginning of Report	\$ 1,274.81
Total Receipts	\$ 400.00
Subtotal	\$ 1,674.81
Total Disbursements	\$ 1,156.69
CASH BALANCE END OF REPORT	\$ 518.12
INCURRED OBLIGATIONS (Balance at the Close of This Period-3A)	\$
LOANS (Balance at the Close of This Period-3B)	\$

I certify that I have examined this report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Candidate or Treasurer

Julie A. Jansch

Signature of Candidate or Treasurer

Julie A. Jansch
Email: *jansch@gnm.com*

Date:

7-10-14
Daytime Phone: *920-499-8801*

NOTE: The information on this form is required by ss.11.06, 11.20, Wis. Stats. Failure to provide the information may subject you to the penalties of ss.11.60, 11.61, Wis. Stats.

GAB-2L (Rev. 04/14)

This form is prescribed by the Government Accountability Board. Completed forms must be filed with your local clerk.

Complete Committee Name
Friends of Julie Jansch

Instructions for completing schedules are on the back of each schedule.

Date	Full Name, Mailing Address and Zip Code	Occupation, Name and Address of Principal Place Of Employment (if year-to-date total exceeds \$100)	Amount	Calendar Year-to-Date Total
3 / 24 / 14	Linda Doro 1103 Raleigh St. Green Bay, WI 54304		100.00	
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit	Conduit Name: _____		
/ /	Full Name, Mailing Address and Zip Code	Occupation, Name and Address of Principal Place Of Employment (if year-to-date total exceeds \$100)	Amount	Calendar Year-to-Date Total
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit	Conduit Name: _____		
/ /	Full Name, Mailing Address and Zip Code	Occupation, Name and Address of Principal Place Of Employment (if year-to-date total exceeds \$100)	Amount	Calendar Year-to-Date Total
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit	Conduit Name: _____		
/ /	Full Name, Mailing Address and Zip Code	Occupation, Name and Address of Principal Place Of Employment (if year-to-date total exceeds \$100)	Amount	Calendar Year-to-Date Total
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit	Conduit Name: _____		
/ /	Full Name, Mailing Address and Zip Code	Occupation, Name and Address of Principal Place Of Employment (if year-to-date total exceeds \$100)	Amount	Calendar Year-to-Date Total
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit	Conduit Name: _____		
/ /	Full Name, Mailing Address and Zip Code	Occupation, Name and Address of Principal Place Of Employment (if year-to-date total exceeds \$100)	Amount	Calendar Year-to-Date Total
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit	Conduit Name: _____		
/ /	Full Name, Mailing Address and Zip Code	Occupation, Name and Address of Principal Place Of Employment (if year-to-date total exceeds \$100)	Amount	Calendar Year-to-Date Total
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit	Conduit Name: _____		

SUBTOTAL ITEMIZED CONTRIBUTIONS THIS PAGE

\$ 100.00

TOTAL ITEMIZED CONTRIBUTIONS

\$

TOTAL UNITEMIZED CONTRIBUTIONS \$20 OR LESS

\$

TOTAL CONTRIBUTIONS RECEIVED FROM INDIVIDUALS

\$ 100.00

SCHEDULE 1-B

RECEIPTS
Contributions from Committees
(Transfers-In)

Page 1 of 1

Complete Committee Name
Friends of Julie Jansch

Instructions for completing schedules are on the back of each schedule.

Date	Full Name of Committee, Mailing Address and Zip Code	Amount	Calendar Year-To-Date Total
3/28/14	Wisconsin Laborers District Council, 4633 Liuna Way, Suite 101 DeForest, WI 53532 <small>Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan</small>	100.00	
4/7/14	AFSCME-INTERNATIONAL, 1625 L. ST. N.W. Washington, DC 20036 <small>Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan</small>	200.00	
/ /	Full Name of Committee, Mailing Address and Zip Code <small>Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan</small>	Amount	Calendar Year-To-Date Total
/ /	Full Name of Committee, Mailing Address and Zip Code <small>Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan</small>	Amount	Calendar Year-To-Date Total
/ /	Full Name of Committee, Mailing Address and Zip Code <small>Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan</small>	Amount	Calendar Year-To-Date Total
/ /	Full Name of Committee, Mailing Address and Zip Code <small>Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan</small>	Amount	Calendar Year-To-Date Total
/ /	Full Name of Committee, Mailing Address and Zip Code <small>Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan</small>	Amount	Calendar Year-To-Date Total
/ /	Full Name of Committee, Mailing Address and Zip Code <small>Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan</small>	Amount	Calendar Year-To-Date Total
/ /	Full Name of Committee, Mailing Address and Zip Code <small>Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan</small>	Amount	Calendar Year-To-Date Total
/ /	Full Name of Committee, Mailing Address and Zip Code <small>Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan</small>	Amount	Calendar Year-To-Date Total
/ /	Full Name of Committee, Mailing Address and Zip Code <small>Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan</small>	Amount	Calendar Year-To-Date Total

SUBTOTAL CONTRIBUTIONS (Transfers-In) THIS PAGE \$300.00

TOTAL CONTRIBUTIONS (Transfers-In) RECEIVED FROM COMMITTEES \$300.00

3 of 5

SCHEDULE 2-A
DISBURSEMENTS
 Gross Expenditures

 Page 1 of 1

 Complete Committee Name
Friends of Julie Jansch

Instructions for completing schedules are on the back of each schedule.

Date	Full Name, Mailing Address and Zip Code Of Person or Business to Whom Payment is Made	Specific Purpose of Expenditure	Amount
3 / 26 / 14	Brown County Graphics, P.O. Box 12497 Green Bav. WI 54307 Check if: <input type="checkbox"/> In-Kind Offset	Postcard Printing	213.11
3 / 21 / 14	Brown County Graphics, P.O. Box 12497 Green Bav. WI. 54307 Check if: <input type="checkbox"/> In-Kind Offset	Door Cards	263.75
3 / 28 / 14	United States Postal Service, P.O> Box 8291. Green Bav. 54304 Check if: <input type="checkbox"/> In-Kind Offset	Bulk Mailing	295.45
3 / 20 / 14	Dollar Tree, 811 S. Military, Green Bay, WI 54304 Check if: <input type="checkbox"/> In-Kind Offset	Office Supplies	9.50
3 / 21 / 14	Dollar Tree, 811 S. Military, Green Bay, WI 54304 Check if: <input type="checkbox"/> In-Kind Offset	Office Supplies	6.33
3 / 31 / 14	Cartridge World, Green Bay, WI 54304 Check if: <input type="checkbox"/> In-Kind Offset	Printer Ink	33.55
4 / 10 / 14	Julie Jansch, 2574 Oakwood Drive, Green Bav. WI. 54304 Check if: <input type="checkbox"/> In-Kind Offset	Yard Sign re-imbursement	285.00

SUBTOTAL ITEMIZED EXPENDITURES THIS PAGE

 \$ **1,106.69**

TOTAL ITEMIZED EXPENDITURES

\$

TOTAL UNITEMIZED EXPENDITURES \$20 OR LESS

\$

TOTAL EXPENDITURES

 \$ **1,106.69**

4 of 5

SCHEDULE 2-B
DISBURSEMENTS
Contributions To Committees
(Transfers-Out)

Page 1 of 1

Complete Committee Name

Friends of Julie Jansch

Instructions for completing schedules are on the back of each schedule.

Date 5/21/14	Full Name, Mailing Address and Zip Code Assembly Democrats P.O. Box 814, Madison, WI 53701	Amount 50.00	Calendar Year-To-Date Total
	Check if <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan		
Date / /	Full Name, Mailing Address and Zip Code	Amount	Calendar Year-To-Date Total
	Check if <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan		
Date / /	Full Name, Mailing Address and Zip Code	Amount	Calendar Year-To-Date Total
	Check if <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan		
Date / /	Full Name, Mailing Address and Zip Code	Amount	Calendar Year-To-Date Total
	Check if <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan		
Date / /	Full Name, Mailing Address and Zip Code	Amount	Calendar Year-To-Date Total
	Check if <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan		
Date / /	Full Name, Mailing Address and Zip Code	Amount	Calendar Year-To-Date Total
	Check if <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan		
Date / /	Full Name, Mailing Address and Zip Code	Amount	Calendar Year-To-Date Total
	Check if <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan		
Date / /	Full Name, Mailing Address and Zip Code	Amount	Calendar Year-To-Date Total
	Check if <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan		

SUBTOTAL CONTRIBUTIONS (Transfers-Out) THIS PAGE

\$ **50.00**

TOTAL CONTRIBUTIONS (Transfers-Out) MADE TO COMMITTEES

\$ **50.00**
*****End of Report*****

5 of 5

Campaign Finance ReportShort Form EB-2a
State Elections Board

☐ Spring ☐ Fall ☐ Special Pre-Primary ☐ Continuing Report due Jan. 31, _____
☐ Spring ☐ Fall ☐ Special Pre-Election ☒ Continuing Report due July 20, 2014

Name of Candidate or Committee (in full)

Sandra L. Juno
616 Dauphin St.

Address (number and street)

Green Bay, WI 54301

City, State, Zip

I certify that the above named committee or candidate did not receive contributions or other income, make disbursements, or incur obligations during the period covered by this report and that the cash balance remains the same as previously reported. This report fulfills filing requirements under Sec. 11.06(9), Stats.

Signature of Committee Treasurer or Candidate

Date

Daytime Phone

*Sandra L. Juno**7-7-14**920-448-4021*

EB-2a (Rev. 9/95) (Reformatted 3/98) (Y2K 9/99)

**SHORT FORM – Use For “No
Activity” Reporting Period**

*****End of Report*****



**CAMPAIGN FINANCE REPORT
LOCAL COMMITTEES OF WISCONSIN**

Is This Report an Amendment: ☐ Yes ☒ No

Instructions for completing schedules are on the back of each schedule.

COMMITTEE IDENTIFICATION

Name of Committee

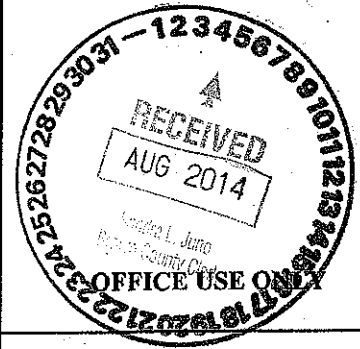
FRIENDS OF CAROL

Street Address

11320 N CRESTVIEW

City, State and Zip Code

Fountain Hills, AZ 85268



Please check if address is different than previously reported, and complete the Campaign Registration Statement in the back of this form. ☐

NAME OF REPORT

☒ January Continuing ☐ Pre-Primary ☐ Spring ☐ Fall ☐ Special
☒ July Continuing 2014 ☐ Pre-Election ☐ Spring ☐ Fall ☐ Special

☐ Termination Report
also complete Schedule 4

SUMMARY OF RECEIPTS AND DISBURSEMENTS

1. RECEIPTS

Column A
This Period

Column B
Calendar
Year-To-Date

1A. Contributions (Including Loans) from Individuals

\$ 200

\$ 200

1B. Contributions from Committees (Transfers-In)

\$

\$

1C. Other Income and Commercial Loans

\$

\$

TOTAL RECEIPTS (Add totals from 1A, 1B and 1C)

\$

\$

2. DISBURSEMENTS

2A. Gross Expenditures

\$

\$

2B. Contributions to Committees (Transfers-Out)

\$

\$

TOTAL DISBURSEMENTS (Add totals from 2A and 2B)

\$

\$ 200

CASH SUMMARY

Cash Balance Beginning of Report

\$ 6572.85

Total Receipts

\$

Subtotal

\$

Total Disbursements

\$ 200.00

CASH BALANCE END OF REPORT

\$ 6372.85

INCURRED OBLIGATIONS

(Balance at the Close of This Period-3A)

\$

LOANS (Balance at the Close of This Period-3B)

\$

I certify that I have examined this report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Candidate or Treasurer

Carol Kelsch

Signature of Candidate or Treasurer

Carol Kelsch

Date:

Daytime Phone: July 31

NOTE: The information on this form is required by ss.11.06, 11.20, Wis. Stats. Failure to provide the information may subject you to the penalties of ss.11.60, 11.61, Wis. Stats.

GAB-2L (Rev. 12/09) This form is prescribed by the Government Accountability Board. Completed forms must be filed with your local clerk.

SCHEDULE 1-A
RECEIPTS
Contributions (Including Loans) From Individuals

Page ____ of ____

Complete Committee Name

Instructions for completing schedules are on the back of each schedule.

Date	Full Name, Mailing Address and Zip Code	Occupation, Name and Address of Principal Place Of Employment (if year-to-date total exceeds \$100)	Amount	Calendar Year-to-Date Total
6/13/14	Friends of John Vanderlaan 1422 Beech Tree Dr Green Bay WI 54304	STATE EMPLOYEE - office of Sen. Frank LaRose	200 ⁰⁰	200 ⁰⁰
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit	Conduit Name:		
	Full Name, Mailing Address and Zip Code	Occupation, Name and Address of Principal Place Of Employment (if year-to-date total exceeds \$100)		Calendar Year-to-Date Total
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit	Conduit Name:		
	Full Name, Mailing Address and Zip Code	Occupation, Name and Address of Principal Place Of Employment (if year-to-date total exceeds \$100)		Calendar Year-to-Date Total
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit	Conduit Name:		
	Full Name, Mailing Address and Zip Code	Occupation, Name and Address of Principal Place Of Employment (if year-to-date total exceeds \$100)		Calendar Year-to-Date Total
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit	Conduit Name:		
	Full Name, Mailing Address and Zip Code	Occupation, Name and Address of Principal Place Of Employment (if year-to-date total exceeds \$100)		Calendar Year-to-Date Total
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit	Conduit Name:		
	Full Name, Mailing Address and Zip Code	Occupation, Name and Address of Principal Place Of Employment (if year-to-date total exceeds \$100)		Calendar Year-to-Date Total
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit	Conduit Name:		
	Full Name, Mailing Address and Zip Code	Occupation, Name and Address of Principal Place Of Employment (if year-to-date total exceeds \$100)		Calendar Year-to-Date Total
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit	Conduit Name:		
	Full Name, Mailing Address and Zip Code	Occupation, Name and Address of Principal Place Of Employment (if year-to-date total exceeds \$100)		Calendar Year-to-Date Total
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit	Conduit Name:		

SUBTOTAL ITEMIZED CONTRIBUTIONS THIS PAGE

\$ 200

TOTAL ITEMIZED CONTRIBUTIONS

\$ 200

TOTAL UNITEMIZED CONTRIBUTIONS \$20 OR LESS

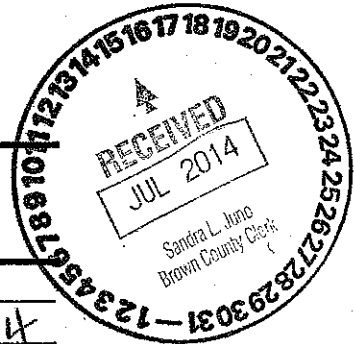
\$

TOTAL CONTRIBUTIONS RECEIVED FROM INDIVIDUALS

\$

*****End of Report*****

2 of 2

Campaign Finance ReportShort Form EB-2a
State Elections Board

☐ Spring ☐ Fall ☐ Special Pre-Primary ☐ Continuing Report due Jan. 31,
☐ Spring ☐ Fall ☐ Special Pre-Election ☒ Continuing Report due July 20, 14

Tom Cund
Name of Candidate or Committee (in full)
2091 Mary Lane
Address (number and street)
Swanico WI 54313
City, State, Zip

I certify that the above named committee or candidate did not receive contributions or other income, make disbursements, or incur obligations during the period covered by this report and that the cash balance remains the same as previously reported. This report fulfills filing requirements under Sec. 11.06(9), Stats.

Signature of Committee Treasurer or Candidate

Date

Daytime Phone

Tom Cund 7/16/14 920 592-3353

EB-2a (Rev. 9/95) (Reformatted 3/98) (Y2K 9/99)

**SHORT FORM – Use For “No
Activity” Reporting Period**

*****End of Report*****

**CAMPAIGN FINANCE REPORT
LOCAL COMMITTEES OF WISCONSIN**

Is This Report an Amendment: ☐ Yes ☒ No

Instructions for completing schedules are on the back of each schedule.

COMMITTEE IDENTIFICATION

Name of Committee

Friends of Chuck Mahlik

Street Address

3103 S Clay St

City, State and Zip Code

Green Bay, WI 54301



Please check if address is different than previously reported, and complete the Campaign Registration Statement in the back of this form. ☐

NAME OF REPORT

☐ January Continuing ☐ Pre-Primary ☐ Spring ☐ Fall ☐ Special

☒ July Continuing 2014 ☐ Pre-Election ☐ Spring ☐ Fall ☐ Special

☐ Termination Report
also complete Schedule 4

SUMMARY OF RECEIPTS AND DISBURSEMENTS

1. RECEIPTS

Column A
This Period

Column B
Calendar
Year-To-Date

1A. Contributions (Including Loans) from Individuals \$ 2,370.00 \$ 2,370.00

1B. Contributions from Committees (Transfers-In) \$ 250.00 \$ 250.00

1C. Other Income and Commercial Loans \$ 0.00 \$ 0.00

TOTAL RECEIPTS (Add totals from 1A, 1B and 1C) \$ 2,620.00 \$ 2,620.00

2. DISBURSEMENTS

2A. Gross Expenditures \$ 472.25 \$ 472.25

2B. Contributions to Committees (Transfers-Out) \$ 0.00 \$ 0.00

TOTAL DISBURSEMENTS (Add totals from 2A and 2B) \$ 472.25 \$ 472.25

CASH SUMMARY

Cash Balance Beginning of Report \$ 0.00

Total Receipts \$ 2,620.00

Subtotal \$ 2,620.00

Total Disbursements \$ 472.25

CASH BALANCE END OF REPORT \$ 2,147.75

INCURRED OBLIGATIONS
(Balance at the Close of This Period-3A) \$ 0.00

LOANS (Balance at the Close of This Period-3B) \$ 2,000.00

I certify that I have examined this report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Candidate or Treasurer

Charles T. Mahlik

Signature of Candidate or Treasurer

Charles T. Mahlik

Date: 7/19/14

Daytime Phone: (920) 448-4076

NOTE: The information on this form is required by ss.11.06, 11.20, Wis. Stats. Failure to provide the information may subject you to the penalties of ss.11.60, 11.61, Wis. Stats.

GAB-2L (Rev. 12/09) This form is prescribed by the Government Accountability Board. Completed forms must be filed with your local clerk.

pg. 1 of 6

SCHEDULE 1-A
RECEIPTS
Contributions (Including Loans) From Individuals

 Page 1 of 5

Complete Committee Name

Friends of Chuck Mahlik

Instructions for completing schedules are on the back of each schedule.

Date	Full Name, Mailing Address and Zip Code	Occupation, Name and Address of Principal Place Of Employment (if year-to-date total exceeds \$100)	Amount	Calendar Year-to-Date Total
5/26/14	John Walch 2762 Old Coach Rd Green Bay, WI 54302		50.00	50.00
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Conduit	Conduit Name: <u>Act Blue</u>		
6/11/14	Chad Feld 1543 Morrow St Green Bay, WI 54302		50.00	50.00
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Conduit	Conduit Name: <u>Act Blue</u>		
5/30/14	Kathleen Feld 5483 Maple Heights Sturgeon Bay, WI 54235	Homemaker	100.00	100.00
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Conduit	Conduit Name:		
6/24/14	Virginia Johnson 2456 Morning Star Green Bay, WI 54302		50.00	50.00
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Conduit	Conduit Name:		
4/30/14	Kerry Blaney 3593 Valley Brooke Ln Howard, WI 54313	Retired	100.00	100.00
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Conduit	Conduit Name:		
6/30/14	Patrick J Costello 420 N Locust St Green Bay, WI 54303		20.00	20.00
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Conduit	Conduit Name:		
4/14/14	Charles Mahlik 3103 S Clay St Green Bay, WI 54301	Deputy Treasurer Brown County 305 E Walnut St Green Bay, WI 54301	500.00	500.00
	Check if: <input type="checkbox"/> In-Kind <input checked="" type="checkbox"/> Loan <input type="checkbox"/> Conduit	Conduit Name:		
5/14/14	Charles Mahlik 3103 S Clay St Green Bay, WI 54301	Deputy Treasurer Brown County 305 E Walnut St Green Bay, WI 54301	500.00	1,000.00
	Check if: <input type="checkbox"/> In-Kind <input checked="" type="checkbox"/> Loan <input type="checkbox"/> Conduit	Conduit Name:		

SUBTOTAL ITEMIZED CONTRIBUTIONS THIS PAGE

\$1,370.00

TOTAL ITEMIZED CONTRIBUTIONS

\$2,370.00

TOTAL UNITEMIZED CONTRIBUTIONS \$20 OR LESS

\$ 0.00

TOTAL CONTRIBUTIONS RECEIVED FROM INDIVIDUALS

\$2,370.00

Pg. 2 of 6

SCHEDULE 1-A
RECEIPTS

 Page 2 of 5
Contributions (Including Loans) From Individuals

Complete Committee Name

Friends of Chuck Mahlik

Instructions for completing schedules are on the back of each schedule.

Date	Full Name, Mailing Address and Zip Code	Occupation, Name and Address of Principal Place Of Employment (if year-to-date total exceeds \$100)	Amount	Calendar Year-to-Date Total
6-16-11	Charles Mahlik 3103 S Clay St Green Bay, WI 54301	Deputy Treasurer Brown County 305 E Walnut St Green Bay, WI 54301	1,000.00	2,000.00
	Check if: <input type="checkbox"/> In-Kind <input checked="" type="checkbox"/> Loan <input type="checkbox"/> Conduit	Conduit Name:		Calendar Year-to-Date Total
1 / 1		Occupation, Name and Address of Principal Place Of Employment (if year-to-date total exceeds \$100)		
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit	Conduit Name:		Calendar Year-to-Date Total
1 / 1		Occupation, Name and Address of Principal Place Of Employment (if year-to-date total exceeds \$100)		
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit	Conduit Name:		Calendar Year-to-Date Total
1 / 1		Occupation, Name and Address of Principal Place Of Employment (if year-to-date total exceeds \$100)		
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit	Conduit Name:		Calendar Year-to-Date Total
1 / 1		Occupation, Name and Address of Principal Place Of Employment (if year-to-date total exceeds \$100)		
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit	Conduit Name:		Calendar Year-to-Date Total
1 / 1		Occupation, Name and Address of Principal Place Of Employment (if year-to-date total exceeds \$100)		
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit	Conduit Name:		Calendar Year-to-Date Total
1 / 1		Occupation, Name and Address of Principal Place Of Employment (if year-to-date total exceeds \$100)		
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit	Conduit Name:		Calendar Year-to-Date Total
1 / 1		Occupation, Name and Address of Principal Place Of Employment (if year-to-date total exceeds \$100)		
	Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan <input type="checkbox"/> Conduit	Conduit Name:		Calendar Year-to-Date Total

SUBTOTAL ITEMIZED CONTRIBUTIONS THIS PAGE

\$ 1,000.00

TOTAL ITEMIZED CONTRIBUTIONS

\$ 2,370.00

TOTAL UNITEMIZED CONTRIBUTIONS \$20 OR LESS

\$ 0.00

TOTAL CONTRIBUTIONS RECEIVED FROM INDIVIDUALS

\$ 2,370.00

Pg. 3 of 6

SCHEDULE 1-B

RECEIPTS
Contributions from Committees
(Transfers-In)

Page 3 of 5

Complete Committee Name

Friends of Chuck Mahlik

Instructions for completing schedules are on the back of each schedule.

Date	Full Name of Committee, Mailing Address and Zip Code	Amount	Calendar Year-To-Date Total
6/23/14	Brown County Democratic Party 118 S Chestnut AV Green Bay, WI 54303 Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan	250.00	250.00
/ /	Full Name of Committee, Mailing Address and Zip Code Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan		Calendar Year-To-Date Total
/ /	Full Name of Committee, Mailing Address and Zip Code Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan		Calendar Year-To-Date Total
/ /	Full Name of Committee, Mailing Address and Zip Code Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan		Calendar Year-To-Date Total
/ /	Full Name of Committee, Mailing Address and Zip Code Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan		Calendar Year-To-Date Total
/ /	Full Name of Committee, Mailing Address and Zip Code Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan		Calendar Year-To-Date Total
/ /	Full Name of Committee, Mailing Address and Zip Code Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan		Calendar Year-To-Date Total
/ /	Full Name of Committee, Mailing Address and Zip Code Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan		Calendar Year-To-Date Total
/ /	Full Name of Committee, Mailing Address and Zip Code Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan		Calendar Year-To-Date Total
/ /	Full Name of Committee, Mailing Address and Zip Code Check if: <input type="checkbox"/> In-Kind <input type="checkbox"/> Loan		Calendar Year-To-Date Total
SUBTOTAL CONTRIBUTIONS (Transfers-In) THIS PAGE		\$ 250.00	
TOTAL CONTRIBUTIONS (Transfers-In) RECEIVED FROM COMMITTEES		\$ 250.00	

Pg. 4 of 6

SCHEDULE 2-A
DISBURSEMENTS
Gross Expenditures

Page 4 of 5

Complete Committee Name

Friends of Chuck Mahlik

Instructions for completing schedules are on the back of each schedule.

Date	Full Name, Mailing Address and Zip Code Of Person or Business to Whom Payment is Made	Specific Purpose of Expenditure	Amount
4/20/14	Bluehost 560 Timpanogos Pkwy Orem, UT 84097 Check if: <input type="checkbox"/> In-Kind Offset	Campaign website	133.37 133.96
5/6/14	Vistaprint USA Inc 95 Hayden Av Lexington, MA 02421 Check if: <input type="checkbox"/> In-Kind Offset	Campaign t-shirts	85.97
5/13/14	GotPrint.com 7625 N San Fernando Rd Burbank, CA 91505 Check if: <input type="checkbox"/> In-Kind Offset	Campaign business cards	110.79
5/18/14	Office Max 2817 S Oneida St Green Bay, WI 54304 Check if: <input type="checkbox"/> In-Kind Offset	Thank you cards and postage	27.19
6/2/14	Vistaprint USA Inc 95 Hayden Av Lexington, MA 02421 Check if: <input type="checkbox"/> In-Kind Offset	Magnetic signs for vehicles	96.22
1/1	Unitemized Expenditures Check if: <input type="checkbox"/> In-Kind Offset	Online donation processing	3.96
4/24/14	Deluxe 3680 Victoria Street North Shoreview, MN 55126 Check if: <input type="checkbox"/> In-Kind Offset	Checks	14.75
1/1			
1/1			
SUBTOTAL ITEMIZED EXPENDITURES THIS PAGE			\$ 468.29 468.29
TOTAL ITEMIZED EXPENDITURES			\$ 468.29 468.29
TOTAL UNITEMIZED EXPENDITURES \$20 OR LESS			\$ 3.96
TOTAL EXPENDITURES			\$ 472.25

ADDITIONAL DISCLOSURE
Loans
Individual, Committee or Commercial

Complete Committee Name

Friends of Chuck Mahlik

Instructions for completing schedules are on the back of each schedule.

	Full Name, Mailing Address and Zip Code of Loan Source	Outstanding Balance Beginning of This Period	New Loans This Period	Cumulative Payments This Period	Outstanding Balance End of This Period
Date	<u>Charles Mahlik</u> <u>3103 S Clay St</u> <u>Green Bay, WI 54301</u>				
<u>4/14/14</u>		<u>0</u>	<u>500.00</u>	<u>0</u>	<u>500.00</u>

List All Endorsers or Guarantors (if any)

Full Name, Mailing Address and Zip Code of Guarantor	Occupation
	Name and Address of Employer
	Amount Guaranteed Outstanding \$
Full Name, Mailing Address and Zip Code of Guarantor	Occupation
	Name and Address of Employer
	Amount Guaranteed Outstanding \$

	Full Name, Mailing Address and Zip Code of Loan Source	Outstanding Balance Beginning of This Period	New Loans This Period	Cumulative Payments This Period	Outstanding Balance End of This Period
Date	<u>Charles Mahlik</u> <u>3103 S Clay St</u> <u>Green Bay, WI 54301</u>				
<u>5/14/14</u>		<u>0</u>	<u>500.00</u>	<u>0</u>	<u>500.00</u>

List All Endorsers or Guarantors (if any)

Full Name, Mailing Address and Zip Code of Guarantor	Occupation
	Name and Address of Employer
	Amount Guaranteed Outstanding \$
Full Name, Mailing Address and Zip Code of Guarantor	Occupation
	Name and Address of Employer
	Amount Guaranteed Outstanding \$

	Full Name, Mailing Address and Zip Code of Loan Source	Outstanding Balance Beginning of This Period	New Loans This Period	Cumulative Payments This Period	Outstanding Balance End of This Period
Date	<u>Charles Mahlik</u> <u>3103 S Clay St</u> <u>Green Bay, WI 54301</u>				
<u>6/16/14</u>		<u>0</u>	<u>1,000.00</u>	<u>0</u>	<u>1,000.00</u>

List All Endorsers or Guarantors (if any)

Full Name, Mailing Address and Zip Code of Guarantor	Occupation
	Name and Address of Employer
	Amount Guaranteed Outstanding \$
Full Name, Mailing Address and Zip Code of Guarantor	Occupation
	Name and Address of Employer
	Amount Guaranteed Outstanding

SUBTOTAL OUTSTANDING LOANS THIS PAGE \$ 2,000.00TOTAL OUTSTANDING LOANS \$ 2,000.00*****End of Report*****pg. 6 of 6

**CAMPAIGN FINANCE REPORT
LOCAL COMMITTEES OF WISCONSIN**

Is This Report an Amendment: ☐ Yes ☒ No

Instructions for completing schedules are on the back of each schedule.

COMMITTEE IDENTIFICATION

Name of Committee

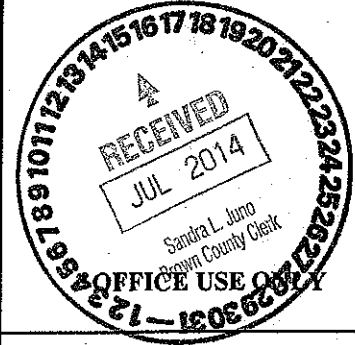
Elect Donna Mason for Clerk of Circuit Courts

Street Address

2591 Greenwald Street

City, State and Zip Code

Green Bay, WI 54301



Please check if address is different than previously reported, and complete the Campaign Registration Statement in the back of this form. ☐

NAME OF REPORT

☐ January Continuing ☒ Pre-Primary 7-1-14 ☐ Spring ☒ Fall ☐ Special
☒ July Continuing 6/30/14 ☐ Pre-Election ☐ Spring ☐ Fall ☐ Special

☐ Termination Report
also complete Schedule 4

SUMMARY OF RECEIPTS AND DISBURSEMENTS

1. RECEIPTS

Column A
This Period

Column B
Calendar
Year-To-Date

1A. Contributions (Including Loans) from Individuals

\$ 3,145.00

\$ 3,145.00

1B. Contributions from Committees (Transfers-In)

\$ 0

\$ 0

1C. Other Income and Commercial Loans

\$ 0

\$ 0

TOTAL RECEIPTS (Add totals from 1A, 1B and 1C)

\$ 3,145.00

\$ 3,145.00

2. DISBURSEMENTS

2A. Gross Expenditures

\$ 2,358.89

\$ 2,358.89

2B. Contributions to Committees (Transfers-Out)

\$ 0

\$ 0

TOTAL DISBURSEMENTS (Add totals from 2A and 2B)

\$ 2,358.89

\$ 2,358.89

CASH SUMMARY

Cash Balance Beginning of Report

\$ 0

Total Receipts

\$ 3,145.00

Subtotal

\$ 3,145.00

Total Disbursements

\$ 2,358.89

CASH BALANCE END OF REPORT

\$ 786.11

INCURRED OBLIGATIONS

(Balance at the Close of This Period-3A)

\$ 0

LOANS (Balance at the Close of This Period-3B)

\$ 0

I certify that I have examined this report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Candidate or Treasurer

Michelle Wallerius, Treasurer

Signature of Candidate or Treasurer

Michelle Wallerius

Date:

7/1/14

Daytime Phone: (920) 606-0030

NOTE: The information on this form is required by ss.11.06, 11.20, Wis. Stats. Failure to provide the information may subject you to the penalties of ss.11.60, 11.61, Wis. Stats.

GAB-2L (Rev. 12/09)

This form is prescribed by the Government Accountability Board. Completed forms must be filed with your local clerk.

Pg. 1 of 6

Elect Donna Mason for Clerk of Courts
 SCHEDULE 1-A Contributions Including Loans from Individuals

IN- KIN D	CON DUT	DATE	LAST	FIRST	ADDRESS	CITY	ST	ZIP	OCCUPATION	EMPLOYER NAME	EMPLOYER ADDRESS	AMOUNT	YTD
		03/24/14	Mason	Donna	2591 Greenwald Street	Green Bay	WI	54301		Brown County		\$ 5.00	\$5.00
		05/19/14	Wieling	Kurt	125 S. Jefferson	Green Bay	WI	54301	Attorney			\$50.00	\$50.00
		05/28/14	Sickel	Alex	346 Heidelberg Court	Green Bay	WI	54302	Attorney	Hinkfuss, Sickel, Petitean & Wieling, SC	125 S. Jefferson Street, Green Bay, WI 54301	\$ 200.00	\$200.00
		04/15/14	Olejniczak	Thomas	1543 Fox Ridge Court	De Pere	WI	54115	Attorney			\$ 100.00	\$100.00
		04/29/14	Gagnan	Robert	716 Pine Street	Green Bay	WI	54301	Attorney			\$ 50.00	\$50.00
		05/16/14	Dahlin	Bernard	2670 Good Shepherd Lane	Green Bay	WI	54313	President	Nichols Paper	N8995 Pine Street, Nichols, WI 54152	\$500.00	\$500.00
		04/15/14	Holda	Jim & Barb	1721 Lost Dauphin Road	De Pere	WI	54115	Retired		1721 Lost Dauphin Road, De Pere, WI 54115	\$ 200.00	\$200.00
		05/08/14	Thomson	Mike	2671 Continental Drive	Green Bay	WI	54311	Insurance Agent			\$ 100.00	\$100.00
		05/08/14	Ritchay	Sue	3452 Emma Lane	De Pere	WI	54115	Operation	Chase		\$ 50.00	\$50.00
		05/16/14	Martin	Terri	320 Arbor Lane	Green Bay	WI	54301	Homemaker			\$ 100.00	\$100.00
		04/29/14	Jaekels	Jeff	337 Braebourne Court	Green Bay	WI	54301	Attorney	Wanezek & Jaekels, SC	417 S. Adams Street, Green Bay, WI 54301	\$ 200.00	\$200.00
		04/15/14	Pettiean	John	125 S. Jefferson	Green Bay	WI	54301	Attorney			\$ 50.00	\$50.00
		04/29/14	Hickey	Peter	8606 Rileys Bay Road	Brussels	WI	54204	Attorney			\$ 100.00	\$100.00

Circle 2071
Schedule 1-A

Case No.	Date	Plaintiff	Defendant	Address	City	State	Zip	Attorney	Firm	Amount	Settlement
05/08/14	Vopal	Cynthia	4095 Three Penny Court	De Pere	WI	54115	Attorney	State of WI	300 E. Walnut Street, Green Bay, WI 54301	\$ 150.00	\$150.00
05/08/14	Duffy	Timothy	PO Box 1251	Green Bay	WI	54305	Attorney			\$50.00	\$50.00
04/29/14	Duffy	Dennis	1614 Willard Terrace	De Pere	WI	54115	Attorney			\$ 50.00	\$50.00
05/08/14	Calewatts	Kenneth	3319 Camelia Court	Green Bay	WI	54301	Attorney			\$ 100.00	\$100.00
04/29/14	Graefe	Syl & Jim	1044 S. Monroe Avenue	Green Bay	WI	5401	Retired			\$ 50.00	\$50.00
05/08/14	Pedretti	Tim & Jessie	402 Custer Court	Green Bay	WI	54301	Attorney			\$ 100.00	\$100.00
04/15/14	Schober	Thomas	2657 Nicolet Drive	Green Bay	WI	54311	Attorney			\$ 25.00	\$25.00
04/15/14	Daul	David	417 S. Adams	Green Bay	WI	54301	Attorney			\$ 25.00	\$25.00
04/15/14	Matyas	David	366 Main Avenue	De Pere	WI	54115	Attorney			\$ 50.00	\$50.00
04/29/14	Anderson	Sue	1003 Liberty Street	Green Bay	WI	54304	Paralegal			\$ 25.00	\$25.00
05/08/14	Monfils	Owen	127 S. Washington St.	Green Bay	WI	54301	Attorney			\$ 25.00	\$25.00
04/29/14	Heide	John	2152 Ridgecrest Trail	Green Bay	WI	54313	Attorney			\$ 50.00	\$50.00
04/15/14	Thompson	Jay	3319 Hyacinth Court	Green Bay	WI	54301	Attorney			\$ 15.00	\$15.00
04/29/14	Gerbers	Terry	480 Pilgrim Way	Green Bay	WI	54304	Attorney			\$100.00	\$100.00
05/28/14	Geisler	Jean	3580 Landings Drive	Excelsior	MN	55331	Homemaker			\$ 100.00	\$100.00
04/29/14	Galloway	Thomas	416 S. Monroe Avenue	Green Bay	WI	54301	Attorney			\$ 50.00	\$50.00
05/08/14	Krawczyk	Judy	2495 Manitowoc Road	Green Bay	WI	54311	Retired			\$50.00	\$50.00
04/15/14	Wanezek	Warren	2365 Donarski Court	Green Bay	WI	54302	Attorney	Wanezek & Jaekels, SC	417 S. Adams Street, Green Bay, WI 54301	\$ 200.00	\$200.00
04/29/14	Larscheid	Richard	4045 Half Crown Run	De Pere	WI	54115	Operations Director	Broadway Automotive		\$ 100.00	\$100.00
05/08/14	Kane	Larry	3933 W. Ontonagon Lane	Green Bay	WI	54301	Retired			\$ 25.00	\$25.00
05/28/14	Larscheid	Bill & Lisa	609 Floral Drive	Green Bay	WI	54301	Owner	Neville, Inc.		\$25.00	\$25.00

Schedule 1-A

1

Pg. 4 of 6

SCHEDULE 2-A
DISBURSEMENTS
Gross Expenditures

Page 1 of 2

Complete Committee Name

Elect Donna Mason for Clerk of Circuit Courts

Instructions for completing schedules are on the back of each schedule.

Date	Full Name, Mailing Address and Zip Code Of Person or Business to Whom Payment is Made	Specific Purpose of Expenditure	Amount
4/15/14	U.S. Postmaster Check if: <input type="checkbox"/> In-Kind Offset	Postage	49.00
4/15/14	Kuehn Printing 401 N. Quincy Street Green Bay, WI 54301 Check if: <input type="checkbox"/> In-Kind Offset	Photocopy Expense Nomination Papers	20.00
4/17/14	Donna Mason 2591 Greenwald Street Green Bay, WI 54301 Check if: <input type="checkbox"/> In-Kind Offset	Expense Reimbursement -Envelopes, labels, Postage, Mail merge	162.86
5/20/14	St. Brendan's Inn - 234 S. Washington Street Green Bay, WI 54301 Check if: <input type="checkbox"/> In-Kind Offset	Committee Mtg -	42.99
5/27/14	US Postmaster Check if: <input type="checkbox"/> In-Kind Offset	Postage	9.80
6/10/14	St. Brendan's Inn 234 S. Washington Street Green Bay, WI 54301 Check if: <input type="checkbox"/> In-Kind Offset	Committee mtg	47.56
6/12/14	Brown Cty Clerk's Office 305 E. Walnut Street Green Bay, WI 54301 Check if: <input type="checkbox"/> In-Kind Offset	Election Report Fee + file	175.00
6/11/14	East Town Printers 725 Victoria Street Green Bay, WI 54302 Check if: <input type="checkbox"/> In-Kind Offset	Election cards -	116.05
6/3/14	Baderland Printing, Inc. 610 George Street De Pere, WI 54115 Check if: <input type="checkbox"/> In-Kind Offset	Printing Election Buttons	197.29

SUBTOTAL ITEMIZED EXPENDITURES THIS PAGE

\$ 820.55

TOTAL ITEMIZED EXPENDITURES

\$

TOTAL UNITEMIZED EXPENDITURES \$20 OR LESS

\$ 0

TOTAL EXPENDITURES

\$

Pg. 5 of 6

SCHEDULE 2-A
DISBURSEMENTS
Gross Expenditures

Page 2 of 2

Complete Committee Name

Elect Donna Mason for Clerk of Circuit Courts

Instructions for completing schedules are on the back of each schedule.

Date	Full Name, Mailing Address and Zip Code Of Person or Business to Whom Payment is Made	Specific Purpose of Expenditure	Amount
6/30/14	Political Lawn Signs 916 Byrd Avenue Alannah, WI 54950 Check if: <input type="checkbox"/> In-Kind Offset	Yard Signs	\$1,275.75
6/23/14	US Postmaster Check if: <input type="checkbox"/> In-Kind Offset	Postage	\$ 9.80
7/1/14	East Town Printers 725 Victoria Street Green Bay Check if: <input type="checkbox"/> In-Kind Offset	Election Brochures	\$ 94.95
7/1/14	US Postmaster Check if: <input type="checkbox"/> In-Kind Offset	Postage	\$ 49.00
7/1/14	Walmart 2292 Main Street Green Bay, WI 54301 Check if: <input type="checkbox"/> In-Kind Offset	Envelopes + Labels	\$ 8.84
7/1/14	Heritage #1 State Park 20405 Webster Avenue Green Bay, WI 54301 Check if: <input type="checkbox"/> In-Kind Offset	Venue - Deposit Fundraiser	100.00
1/1/	Full Name, Mailing Address and Zip Code Of Person or Business to Whom Payment is Made Check if: <input type="checkbox"/> In-Kind Offset	Specific Purpose of Expenditure	Amount
1/1/	Full Name, Mailing Address and Zip Code Of Person or Business to Whom Payment is Made Check if: <input type="checkbox"/> In-Kind Offset	Specific Purpose of Expenditure	Amount
1/1/	Full Name, Mailing Address and Zip Code Of Person or Business to Whom Payment is Made Check if: <input type="checkbox"/> In-Kind Offset	Specific Purpose of Expenditure	Amount

SUBTOTAL ITEMIZED EXPENDITURES THIS PAGE

\$ 1,538.34

TOTAL ITEMIZED EXPENDITURES

\$ 2,358.89

TOTAL UNITEMIZED EXPENDITURES \$20 OR LESS

\$ 0

TOTAL EXPENDITURES

\$ 2,358.89

*****End of Report*****

Pg. 6 of 6

Campaign Finance ReportShort Form EB-2a
State Elections Board

☐ Spring ☐ Fall ☐ Special Pre-Primary ☐ Continuing Report due Jan. 31, _____
☐ Spring ☐ Fall ☐ Special Pre-Election ☒ Continuing Report due July 20, 2014

Name of Candidate or Committee (in full) MOYNIHAN COMMITTEE FOR BETTER GOVERNMENTAddress (number and street) 2444 BABCOCK ROADCity, State, Zip GREEN BAY, WI 54313

I certify that the above named committee or candidate did not receive contributions or other income, make disbursements, or incur obligations during the period covered by this report and that the cash balance remains the same as previously reported. This report fulfills filing requirements under Sec. 11.06(9), Stats.

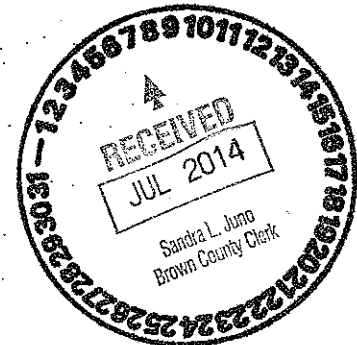
Signature of Committee Treasurer or Candidate

Date

Daytime Phone

Patricia Mayfield07/07/14920-544-8322 (H)

EB-2a (Rev. 9/95) (Reformatted 6/98) (V. 9/99)

**SHORT FORM – Use For “No Activity” Reporting Period*******End of Report*****